New England Deaconess Hospital
Boston, Massachusetts

pulse

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Dr. Zinman and Dr. Libertino devise new urology techniques

Dr. Leonard Zinman, senior staff urologist at Lahey Clinic, director of the renal preservation laboratory, and member of the kidney transplant team, and Dr. John A. Libertino, urology, director of the transplant service at the Lahey Clinic and director of the NEDH transplant committee, have been the innovators of four surgical procedures performed at the Deaconess that have never been done anywhere else in the world.

Both Drs. Zinman and Libertino have devised a procedure called invivo perfusion which has been used when extensive renal surgery and hypothermia are required. Before this development, urologists have removed the kidney from the body and cooled it. An incision opened the kidney and the stones were removed. The kidney then had to be put back into the body as if it were a transplant.

Invivo perfusion leaves the kidney in the body. An opening is made in the aorta and a coronary artery tube is passed into the aorta to the renal artery through which an intravenous solution is dipped which cools the kidney within minutes. An opening is made in the vein allowing the fluid to pass out of the body, not into the circulation. The artery and vein are clamped so that no blood is lost. An incision opens the kidney and the stones are removed. The kidney is then closed, the catheter removed, the openings in the aorta and vein closed, the clamps removed from blood vessels, and blood circulation restored.

The operation takes from three to four hours. Although the procedure is not simple, it can be performed in any hospital by competent urologists because no special equipment is needed as in the other procedure. The advantages of this development are that the kidney remains in the body and there is no blood loss.

(Continued on page 2)

The disaster drill brought members of hospital departments and medical teams to the Farr lobby within fifteen minutes.

Disaster drill staged in lobby

In keeping with the requirements of the Joint Commission for Accreditation of Hospitals, a disaster drill was held on Friday, June 28 at 2:30 P.M. in the hospital lobby. Response was excellent with representatives of all eight teams responding within the first fifteen minutes.

The New England Deaconess Hospital, not having a full emergency ward, is not set up to take casualties without sufficient time for preparation and is listed, therefore, as a second echelon hospital to be used only in very severe disasters. Adequate planning is necessary, and during a drill a control center is organized on Farr one and a large number of hospital departments as well as the aforementioned medical teams are called into action. Each team includes a member of the house staff who is in charge until one of two senior staff men arrives. A triage team is assigned to the lobby to make determinations for the treatment of each patient brought in during a disaster. Other teams are set up for urgent care, surgical care, first aid, x-ray, laboratory tests, etc. Patients requiring hospitalized medical treatment are sent to Farr 3 where a ward survey team makes further decisions as to available beds and type of care needed.

Fortunately, disasters are rare occurences and the Deaconess's need for participation is rarer still. But it is good to know that in the event of a community disaster we are ready through periodic drills and regularly updated procedures to answer a call to provide lifesaving services to those in need.

Mrs. Celander and Miss Mugnier promoted to assistant directors of surgical services

Mrs. Madelyn L. Celander, R.N., operating room supervisor, and Miss Mary Jo Mugnier, R.N., recovery room supervisor, have been appointed Assistant Directors of Surgical Services. Mrs. Celander will assist Miss Margaret A. Burns, Director of Surgical Services, in the management of the operating rooms and central sterile supply, and Miss Mugnier will assist with the recovery room and respiratory therapy. Each will continue in her role as supervisor of the operating room and recovery room, respectively.

Madelyn L. Celander, R.N.

Mrs. Celander graduated from the New England Deaconess Hospital School of Nursing. She began her nursing career as a staff nurse in the Palmer operating room, and was then a nurse for Dr. Clifford C. Franseen, general surgery. In 1951 she joined the operating room part-time nights and weekends. She became operating room head nurse in 1969, and was promoted to supervisor five years later.

Miss Mary Jo Mugnier graduated from the Holyoke Hospital School of Nursing. She entered the nursing profession as a nurse in the emergency room of Holyoke Hospital for a year. After a year in California as a medical/surgical staff nurse, she returned to Massachusetts to Springfield Hospital as a nursing office supervisor. She joined the recovery room at the Deaconess in 1961 and three years later became assistant head nurse, then head nurse. Miss Mugnier left the Deaconess for two years to join the Faulkner Hospital as a staff nurse in the emergency room, then head nurse in the recovery room. She was supervisor and director of a nursing home in the South Shore before returning to the Deaconess to become supervisor in the recovery room.

Mary Jo Mugnier, R.N.

How memorial funds are established

Because so many hospital personnel have asked about the establishment of memorial funds in lieu of flowers, the External Resources Department has provided the following information which should answer many questions.

Memorial gifts may be made to funds for Nursing Scholarships, Nursing Student Loans, Cancer Research, Hodgkin's Disease, Blood Platelet Research, and Coronary Care Unit Research (Heart) as well as to the Medical Equipment Fund and the Building Fund.

The family of the deceased should state in the newspaper obituary notice that contributions in memory of the deceased may be made to the New England Deaconess Hospital and specify the fund,

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Profile: Roger Peterson

For linens that are whiter than white and uniforms that are so crisp that they crackle, all Deaconess heads turn to the laundry. The hospital uses three million pounds of linen a year. And it is Roger Peterson who makes sure that every towel, sheet, and wash cloth is there, clean, folded, and ready for use when needed . . . not an easy accomplishment in these days of shortages.

Mr. Peterson, manager of the laundry for almost ten years, supervises 26 people on two shifts in a laundry which is open 16 hours a day. His schedule overlaps the two shifts and he has informal daily meetings with both the day and night supervisors.

He also manages the grounds department where three people cultivate and trim the grass and keep the flowers blooming in summer and remove snow from saturated sidewalks in winter.

With most of the laundry employees speaking Spanish, communication problems might be expected, "but there are no problems here," says a casual and relaxed Mr. Peterson. "They learn very quickly when I show them what has to be done. Everyone understands what his job is. I have no faults with my people. If anything, my people have faults with me."

The reason Mr. Peterson can be so relaxed is because there are such good feelings between him and his staff.

There is very little turnover in the laundry department. Problems occur, of course, but they are usually small.

There are mechanical breakdowns once in awhile that can happen when any department depends on machinery to perform the day's heavy workload. There are emergency calls when a floor runs out of linens prematurely. But it's all in a day's work.

"If the department weren't running as well as it is, and the people didn't work so well together, I would have many, many problems," says the popular manager. His employees are quick to confide in him when advice is needed.

Everything works on a quota system set up by the nursing and service coordination departments and filled by the laundry. A cart of fresh linen is brought up to the floor and soiled linens are sent back to the laundry by way of laundry chutes.

The Deaconess wasn't always Mr. Peterson's headquarters. He attended Northeastern University, where he studied electrical engineering. For five years he managed the Stoneham Laundry before spending three years as a salesman for Wyandotte Chemicals. Then it was back to the laundry as the manager for the Deaconess.

He grew up in Woburn but now lives in Chelmsford with his wife Janet and their three sons, Donald, 14, Paul, 11, and David, 9.

From 8:30 to 5:00, Mr. Peterson deals with sheets and towels, but after hours, it's hockey sticks, pucks, and face masks — especially masks.

"I don't even skate and I've never played hockey," admits Mr. Peterson. But with three goal tenders in the family, he couldn't help but become involved in Boston's favorite winter pastime.

"I didn't go to any professional games this year," he says. "I'd rather see my kids play. It's more fun."

With three sons playing three to four hours of hockey a week and three games on Saturday, that's a lot of hockey for Mr. and Mrs. Peterson.

Roger Peterson

And when Mr. Peterson isn't at the rink, he's home making face masks. "I became involved in this project with three boys playing goal. When I started making masks there were only three people in the world making them." That was four years ago and now he has quite a business.

These custom built goalie masks are made not only for his sons, but for school, college, Junior A, Canadian, and professional hockey players. Made out of fiberglas, the mask is designed from a face impression. Each one takes six hours to make and Mr. Peterson averages two a week.

There's enthusiasm and pride in Mr. Peterson's descriptions of his sons' exploits on the rink. Every machine in the laundry would have to break down before he would miss one of their games.

"There's no one like him," says Ramon Gonzalez, shipper in the laundry, as he describes Mr. Peterson, the Deaconess' perennial Santa Claus. "He's terrific."

Urology techniques . . .

(Continued from page 1)

The two doctors did the first four operations. Once their technique became known, four more were done at another hospital.

Another new procedure is the revascularization of non-functioning kidneys where the renal artery is totally blocked in patients with renal-vascular hypertension. The technique devised by the two urologists uses a vein from the leg to bypass the blocked artery and reroute the blood to the kidney. Eleven of the twelve patients who have been operated on have had return of kidney function and cure of hypertension. Before this development, the kidney was removed because it was presumed useless.

For patients who have a troublesome aorta which prevents aorta-renal bypass surgery, Drs. Libertino and Zinman have devised a hepatic renal artery bypass in the management of renal-vascular hypertension.

The newest and biggest advance since the ileal conduit which was developed in 1950, is the ileocaecal conduit, an anti-reflux procedure. The ileocaecal region of the bowel is isolated with its blood supply intact. The ileum is then closed and the caecum is brought out as the stoma. Continuity of the gastrointestinal tract is reestablished. The ureters are implanted into the ileum. The ileocaecal valve is imbricated and that allows the ileocaecal valve to become competent, preventing reflux of the urine into the ureters, a major advantage over the ileal conduit.

Drs. Libertino and Zinman have improved the management of diabetic nephropathy by transplanting kidneys into diabetic patients with endstage renal failure. The Joslin and Lahey Clinics, in conjunction with the New England Deaconess Hospital, have combined in a pioneering venture to further the treatment of the diabetic patient with endstage renal failure. This group, with its vast experience, has already shown that the diabetic retinopathy is improved with a successful transplant.

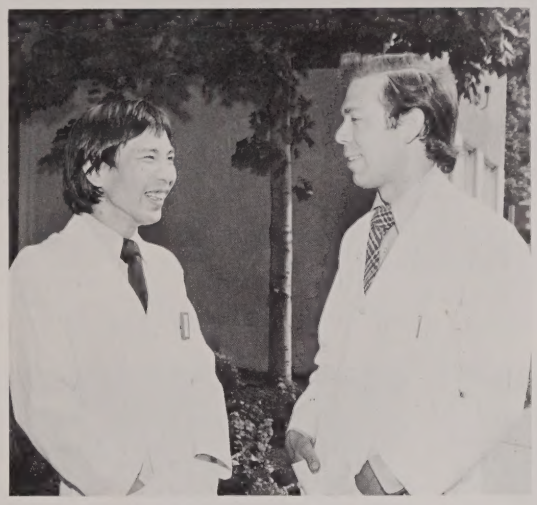
GROUNDBREAKING CEREMONY FOR THE HOWARD F. ROOT WING OF THE JOSLIN DIABETES FOUNDATION. *Mr. Richard E. Lee, Director, was among the speakers at the groundbreaking ceremonies held on June 27 for the Howard F. Root Wing of the Joslin Diabetes Foundation. Named for the late Dr. Root, a former member of the Deaconess Medical Staff and an international authority on diabetes, the new building will be an expansion of the facitities of the Joslin Clinic of which Dr. Root was Medical Director, and of the Joslin Research Laboratory. Pictured above (l.-r.) are: Frederick H. Lovejoy, corporation member of both the Joslin Diabetes Foundation and the New England Deaconess Hospital; Arthur O. Choate, Jr., Chairman of the Board of the Foundation; Mrs. Howard F. Root; and Dr. Alexander Marble, President of the Foundation and Trustee and Medical Staff member at NEDH.*

MR. TED BRINKERT RETIRES. *Mr. Ted Brinkert retired June 28 after 10 years of service in the purchasing services department. "I divided my time between receiving and the inventory stock room," said Mr. Brinkert of his position in the department. Before coming to the Deaconess, Mr. Brinkert worked for 22 years at the Rexall Drug Company. Upon his retiremant he'll be taking more frequent trips to New York City, where he enjoys the shows and the night life of Broadway. A lifelong resident of the Fenway area, he'll continue to tend his victory garden. Honored at a retirement party, Mr. Brinkert (l.) is pictured with Mr. Anthony Cavalieri, manager of purchasing services.*

House officer training program begins

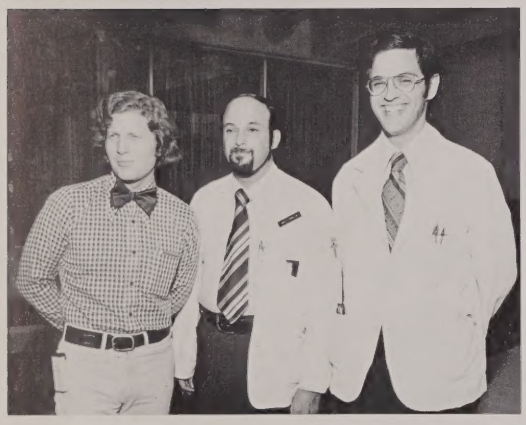
NEDH welcomed over 100 interns, residents, and fellows on July 1 as they began a year of training and service. As introductions were made to new friends and new fields of study, house officers who had completed their year's training were departing to begin their own practice or follow their chosen specialty. The house officers enhance the reputation of the Deaconess as a teaching hospital with their enthusiastic pursuit of knowledge and professional growth.

(Pictures continued on next page)



Getting to know each other are Dr. Kiyoaki Watanabe (l.), Keio University School of Medicine, Japan, and Dr. Murray Bern, Tulane University, Louisiana, hemetology fellows.

Interns in the department of medicine are: (sitting l. - r.) Dr. Alison Lane-Reticker, University of Connecticut, Dr. James Boyle, Columbia College of Physicians and Surgeons, Dr. Robert Gross, Harvard Medical School, Dr. Gregory LaVigne, University of Pennsylvania, Dr. Garrett Ridgley, Howard University, Dr. Len Ennis, Thomas Jefferson University; (standing l. - r.) Dr. Gobchai Puavilai, Ramathibodi Medical School, Thailand, Dr. Brian O'Malley, State University of New York, Downstate, Dr. Douglas Horst, University of California at San Francisco, Dr. Meade Perlman, Case Western Reserve University, Dr. David Eldredge, University of Cincinnati, Dr. Robert Kolodner, Yale School of Medicine, Dr. Martin Solomon, Tufts University, and Dr. Joseph Corkery, Harvard Medical School.



Taking a break from surgery are urology residents (l. - r.) Dr. Michael Goldstein, New York Medical College, Dr. Donald Sawyer, chief resident, New York College, and Dr. Alan Rote, State University of New York, Downstate.

Cardiology fellows (l. - r.) Dr. Steven Draskoczy, Medical School of Budapest, Hungary, Dr. Jens H. Lauridsen, University of Copenhagen, Denmark, Dr. Larry Weinrauch, Faculte de Medicine, Montpelier, France, and Dr. Regis A. DeSilva, University of Malaya, plan the year ahead. Not pictured is Dr. Jose J. Fernandez, University of Madrid, Spain.

Senior assistant residents are: (sitting l. - r.) Dr. Mary Anne Totten, University of Kansas, Dr. Richard Edwards, University of Pittsburgh, Dr. James Woods, University of California at San Francisco, Dr. Cheryl Birchette, Meharry Medical College; (standing l. - r.) Dr. Jerry Blaine, Georgetown University, Dr. Robert Timberlake, University of Rochester, Dr. Thomas Noble, New York Medical College, and Dr. Seth Lewin, Georgetown University.

Junior assistant residents in medicine are: (sitting l. - r.) Dr. August Voelkel, Indiana University School of Medicine, Dr. Curtis Campbell, Harvard Medical School, Dr. Ruth Sampson, Tufts University, Dr. William Anderson, University of Iowa, Dr. Wayne Wild, Columbia College of Physicians and Surgeons, Dr. Joanne Zumwalt, New Jersey College of Medicine; (standing l. - r.) Dr. John Schemmer, Harvard Medical School, Dr. Craig Markert, New York Medical College, Dr. Joseph Tapogna, Georgetown University, Dr. Laurence Cignoli, New Jersey College of Medicine, Dr. Wanda Moore, University of Queensland, Australia, Dr. Edward Layne, Tulane Medical School, and Dr. Tomas Sanabria, Central University of Venezuela. Not pictured are Dr. Gerald Yukevich, University of Cincinnati, Dr. David Webb, Tufts University, and Dr. Gayle Patterson, University of Texas.

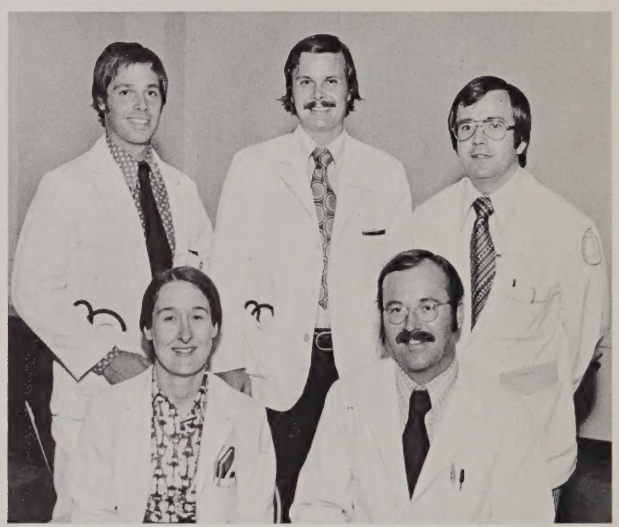
House officer training program . . .

(Continued from page 3)

Fellows appointed jointly by the Lahey Clinic and NEDH include (l. - r.) pulmonary fellows Dr. Richard Dupee, Tufts Medical School, and Dr. David Webb-Johnson, Middlesex Hospital, London; and gastroenterology fellows Dr. Rodrigo Tirado, Antioquia University Medical School, Dr. David Glaser, National University of Mexico, Dr. Poondy Raman, Mahatma Ghandi Memorial Medical College, India, and Dr. Raymundo Mallari, Far Eastern University, Manila. Not pictured is Dr. Marcos A. G. Alves, University of Rio Grande, Brazil, gastroenterology fellow.

Dr. Frank Santopietro, first year resident in podiatry, Pennsylvania College of Podiatric Medicine, will be working closely with second-year resident Dr. John C. Donovan, Illinois College of Podiatric Medicine.

Residents in thoracic surgery are: (l. - r.) Dr. Richard Pavese, senior assistant resident, University of Arizona College of Medicine, Dr. Joan Tryzelaar, University of the Netherlands, Dr. Ricardo Rossi, senior assistant resident, University of Chile, and Dr. Peter Maggs, junior chief resident, University of Capetown, South Africa. Not pictured is senior chief resident Dr. Myles Lee, Tufts University.



Dr. Anne Redfern (sitting left), junior chief resident in general surgery, Harvard Medical School, and Dr. Thomas O'Donnell (sitting right), senior chief resident in general surgery, Tufts University, pose with (standing l. - r.) Dr. George McManama, intern in general surgery, Harvard Medical School, Dr. Benjamin Allen, intern in anesthesia, Tufts University, and Dr. Gary Gibbons, resident in hyperalimentation. Not pictured are senior assistant resident in general surgery Dr. Marc Watson, Boston University, and junior assistant residents in general surgery Dr. Richard Peinert, Harvard Medical School, and Dr. Frank Padberg, University of Arkansas.

Diabetes fellows are: (l-r.) Dr. Dennis Landis, Harvard Medical School, Dr. Ralph Sherman, Georgetown University Medical School, Dr. Arturo Rolla, chief diabetes fellow, Catholic University of Cordoba, Argentina, Dr. Harushige Yamakawa, Mie University, Japan, and Dr. Harvey Bidwell, Loma Linda University, California.

Residents in anatomical pathology are: (sitting l.-r.) Dr. Earl T. Hawkins, Wayne State University, and Dr. Allen L. Paris, Indiana University; (standing l. r.) Dr. William R. Welch, Duke University, and Dr. Mehran Shahsavari, Tehran Medical School, Iran. Dr. Paola C. DeGirolami, Bologna University, Italy, is a resident in clinical pathology. Not pictured is Dr. Fred Ellinger, Faculdade de Med Da University Fed Do, Parana, Brazil.

First year residents in radiation therapy are: (l.-r.) Dr. Anatoly Dritschilo, New Jersey College of Medicine, Dr. David Sherman, Boston University School of Medicine, Dr. Arnold Malcolm, Meharry Medical College, Tennessee, Dr. Steven Carabell, Harvard Medical School, and Dr. Joel Greenberger, Harvard Medical School.

"Occasionally . . . one piece stands out from among the rest, and is recognized, because of the outstanding integration of color, design, type, printing, and paper. We believe the New England Deaconess Hospital 1973 Annual Report to be of this caliber." . . . stated a letter accompanying the Certificate of Excellence from the Strathmore Paper Company Graphics Gallery being presented here to Mr. R. D. Lowry, Executive Vice President, by Mr. Don Mitchell of Woodland Publishing Company, publisher of the NEDH annual report.

NEDH tumor registry records cancer data

How many women between the ages of 35 and 40 had mastectomies in 1971? Of these how many are without recurrence in 1973? How many men between the ages of 20 and 30 had lymphomas in 1971? Of these how many are without recurrence in 1973?

The NEDH tumor registry can answer all these questions and more. Information on individual cancer patients, their treatments, and progress is put on a computerized record for use by clinical and research staffs in their studies.

The NEDH tumor registry has been in existence since 1961. It was reorganized and updated in December, 1973 with all data being put on a computer.

Dr. W. Eugene Knox, under the jurisdiction of the NEDH Cancer Committee, oversees the tumor registry. Mrs. Sadie Hayden is the registrar. One of her responsibilities is training the abstractors, who are the key to setting up the registry.

Medical records are handled only once — when the registration is started. From each patient's medical record, abstractors obtain social information; past medical history; diagnosis; whether diagnosis is made at NEDH, or elsewhere and the patient referred by his private physician to a staff physician; whether treatment is conducted at the Deaconess or elsewhere; and follow-up status, which may mean contacting a private physician. This information is coded for the computer, and all information from the original medical record to the computer print-out is confidential. Only those familiar with the code can interpret the computerized abstract.

Data for any number of studies can be gathered quickly due to computerization.

The Pathology Department, Medical Records Department, and the Joint Center for Radiation Therapy cooperated in modernizing the tumor registry. Cytology and the Stoma Rehabilitation Clinic will be involved soon. The registry is part of the NEDH cancer program. So far 3000 cases have been registered for 1971-73.

The tumor registry must be accredited by the Joint Commission on Accreditation of Hospitals, and the accreditation carried out by the American College of Surgeons.

MRS. ARLENE SPAULDING RETIRES. *After 20 years as a laboratory recorder, Mrs. Arlene Spaulding retired June 27. A retirement party attended by her family, friends, and associates, was held in her honor at the hospital. Originally from Maine, Mrs. Spaulding was supervisor of the school hot lunch program which she initiated in her community before joining the Deaconess. Her position at the Deaconess entailed recording results from laboratory tests on to requisitions and patients' charts, and she was often seen travelling from floor to floor throughout the Palmer building. Her pace won't be reduced upon retirement. She plans to visit members of her family, who are scattered throughout Maine and New York.*

Put a little fun in your life

Someone once said, "What this country needs is a good 5c cigar." That may have been true at the time, and may even set hearts aglow in some circles today. But, most of us would agree that, while we could live without a cigar, what this country needs right now is some good old-fashioned laughter.

We really have much to be cheerful about if we look around us. Yes, it's true, we have a lot to be unhappy about, too, but why dwell on that? Each of us can find something . . . many things . . . to be glad about. Make a game of it. The more you find, the better your world will seem. Maybe it is only that you were able to open your eyes this morning. Maybe it is that you didn't miss your bus or that you found a gas station open. Maybe it is because you have a job and a home and someone who cares. Each of us finds happiness in different forms, but each of us can find something.

Let's start a trend. Happier and more considerate people can perform kinder and more considerate acts, and the repercussions will be felt in all areas of life.

Surely, no one advocates a world of grinning idiots who don't recognize that trouble and unhappiness are a part of life. But, it is the way we cope with adversity that matters. What is needed are more people who take healthy and positive action against the negative realities without creating a sense of doom. Newspapers are filled with terrible things, but that means that bad things are still news. Many, many more good things happen every day. Let's not take them too much for granted.

Each of us has the ability to begin to change the world by improving his or her own outlook and by being more fun to be with. If someone else is unpleasant towards you, try to think of it as his problem. Don't let him bring you down, too. Rather, see what you can do to lift his spirit. It is a great feeling. It is a game everyone can learn to play. Help to make someone else feel better and you will feel better yourself. You don't have to be a Pollyanna or always repress feelings of anger or annoyance. Emotions should be let out. But, let them work for you, not tear you apart. Develop a sense of humor. Don't just complain about the mildew; grasp the opportunity to discover the penicillin. Don't let yourself get in the habit of cursing the darkness; see it as an opportunity to light that 'one little candle' and brighten the corner of someone's life.

And above all . . . try to keep in mind that, given some of the alternatives, this hospital and this country and this world are pretty good places to be and we should do all in our power to help make them great.

Memorial funds ...

(Continued from page 1)

such as Nurse's Scholarship Fund, Cancer Research Fund, etc.

Checks should then be made out to the New England Deaconess Hospital with a notation on the check or a covering letter indicating in whose memory the donation is made and the fund desired. It is important to state the name of the person in whose memory the gift has been given so that acknowledgments can be sent to the family. Only the donors' names and addresses are forwarded to the members of the family, not the amount of the donation. The dollar amount is recorded on the receipt to the donor, however, for verification.

The External Resources Department is responsible for planning, organizing, and directing the raising of money for the hospital from such sources as individuals, foundations, and corporations through development committees, composed of trustees, corporators, medical staff, and friends, which solicit donations.

The department will be pleased to assist in the arrangement of memorial gifts.

"English as a Second Language" to be offered in September

Classes in "English as a Second Language" will resume in mid-September. Beginner, intermediate, and advanced sessions will be conducted one and a half hours a week. Employees who are interested in attending these classes should contact their supervisor for further details. Employees interested in teaching classes should call Miss Zelia Gorman, training coordinator, at extension 2088.

FIRST CLASS OF DIETITIAN TRAINEES GRADUATES FROM NEDH. *Elaine Bielawa, Joanne Wade, Mary Driscoll, and Jamie Davidson (pictured l. - r.) celebrated their graduation from the first NEDH dietitian traineeship with a tea held at Harris Hall on July 25. The one-year program, approved by the American Dietetic Association is a means for college graduates with a major in foods and nutrition to gain membership into the ADA. During the year the students receive training in all aspects of the general operation of the dietary department, with an emphasis on clinical and supervisory responsibilities. Upon completion of the program, which includes classes and affiliations at other Boston hospitals and community centers, they must pass the examination to become a registered member of the American Dietetic Association and be eligible to work in any field as a dietitian.*

Doctors doings...

Dr. Joseph L. Andrews, Jr., internal medicine and pulmonary disease, was inducted as a Fellow of the American College of Physicians in New York City on April 1. On April 20 at a meeting of the American Thoracic Society in Hyannis, Massachusetts, Dr. Andrews presented the case "Spontaneous Rupture of the Esophagus (Boerhaave's Syndrome)." With Dr. John Bemis, pulmonary fellow, he presented "The Changing Epidemiology of Lung Cancer." "The Management of Acute Respiratory Failure" was the subject of a talk Dr. Andrews gave April 30 at the Tuft's Medical School respiratory course.

* * *

Dr. David P. Boyd, thoracic surgery, was a visiting professor in Columbia, Guatemala City, and Mexico City on March 20 - April 8.

* * *

Dr. Lloyd D. Flint, urology, presented the paper "Belated Recognition of ACTH-producing tumors in post-adrenalectomized Cushing's Syndrome" to the southeastern section of the American Urological Association in Florida on March 25.

* * *

Dr. Harold D. Levine, cardiology, served as chairman at a clinical session entitled "The Problem Electrocardiogram" at the annual meeting of the American Heart Association at Atlantic City on November 10. On February 11 he was chairman of the fireside panel "The Vectorcardiogram: What is its Value?" at the 23rd annual session of the American College of Cardiology in New York City.

* * *

Dr. John A. Libertino, urology, published the article "What's new and important in urinary tract infections in children?" in the March 27, 1974 issue of *Medical Tribune.*

Thaler Unit dedicated

A dedication service for the Richard Winston Thaler Unit on Farr 10 was held in the Riverview Room at 110 Francis Street at 11 A.M. on Sunday, June 16. The ceremony was attended by Mrs. Richard Thaler, her four sons and daughter, and Dr. Thaler's parents, Dr. and Mrs. Alwin Thaler, who had come from Knoxville, Tennessee for the occasion. A large number of Dr. and Mrs. Thaler's family and friends were also present for the fine tribute to Dr. Richard Thaler, in whose memory the unit has been named.

Dr. Thaler died suddenly in 1972 while mountain climbing with his youngest son. He had been a dedicated teacher to the house staff at the Deaconess Hospital and was very active and concerned with medical education here. When a unit was planned to allow residents and interns greater teaching opportunities and more direct patient care, members of the house staff suggested that it was appropriate to name it for a man who had participated so fully in post doctoral teaching.

At the dedication ceremony, Dr. James L. Tullis, Chairman of the Department of Medicine, gave the main address stressing the need to view the occasion as a beginning and an opportunity for increased education for many young physicians. Warm and personal tributes were paid by Dr. Theodore Badger and Richard W. Thaler, Jr. and a plaque was presented by R. D. Lowry, Executive Vice President. After a benediction by Chaplain Martin E. Cernek, the family and friends enjoyed several moments of fellowship and renewing of acquaintances.

Attending the dedication ceremonies for the Richard Winston Thaler Unit was: (sitting l.-r.) Mrs. Richard Thaler, Mrs. Alwin Thaler, Alwin Thaler, Ph.D., Victoria; (standing l.r.) Roderick, Richard, Jr., Warren, and Thomas, children of Dr. Thaler.

What's good about hospitals?

Hospitals do tremendous amounts of very good, lifesaving work but too often we hear only about the less frequent bad things that occur in hospitals throughout the country.

To counteract this adverse national publicity, the American Hospital Association is undertaking an advertising campaign to tell the hospital story in a positive way.

Four different thirty-second messages will be televised nationwide during the ABC, CBS, and NBC networks' evening newscasts from September 16 to October 12.

We should all be proud of the part we play in the health care industry. Meeting the public's demands for the best in health services is costly, but hospitals are being responsive and responsible in trying to contain costs while meeting the needs of their patients and employees. Courtesy and concern can be added without cost.

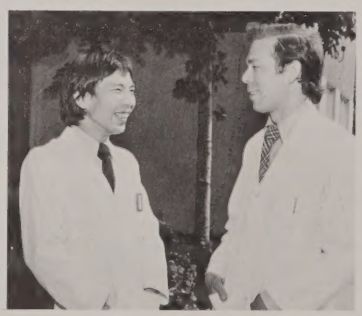
We can all support the AHA's effort to improve the public's image of hospitals through our own efforts and by supporting those points made in the upcoming television spots.

We have something to praise — let's do it.

New England Deaconess Hospital
185 Pilgrim Road
Boston, Massachusetts 02215

pulse

NEW HOUSE OFFICERS ARRIVE:
See pages 3 and 4.



The New England Deaconess Hospital is a 482-bed and 16-building complex. Physicians from the Joslin Diabetes Foundation, Inc., the Lahey Clinic, Overholt Thoracic Clinic and the independent medical and surgical staffs serve the needs of their patients at the hospital. The Deaconess is internationally known for diagnosis, treatment and research in brain and chest surgery, cancer, diabetes and general medicine.

PULSE is published monthly by the public relations department of the New England Deaconess Hospital.

R. D. Lowry
Executive Vice President
Richard E. Lee
Director
M. Eleanor Clapp
Public Relations Manager
Diane Wiffin
Public Relations Assistant
Dorothea Burke
Secretary

New England Deaconess Hospital
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